

SELF-CONCEPTS OF LOW-INCOME OLDER WOMEN: NOT OLD OR POOR, BUT FORTUNATE AND BLESSED

AMANDA SMITH BARUSCH, M.S.W., PH.D.

University of Utah, Salt Lake City

ABSTRACT

This article examines the extent to which low-income older women define themselves in stigmatizing terms, then explores the strategies they use to preserve a positive sense of self. Instead of considering themselves "old" or "poor," the sixty-two women interviewed defined themselves as "fortunate" and/or "blessed." The ability to see oneself as fortunate may be a significant component of successful aging.

INTRODUCTION

In his classic essay, *Stigma: Notes on the Management of a Spoiled Identity*, Erving Goffman argued that stigma, ". . . is really a special kind of relationship between attribute and stereotype" [1, p. 4]. For Goffman, any attribute is potentially stigmatizable. It is through social construction of norms and stereotypes that objective conditions (such as age and poverty) assume negative connotations. Goffman introduced the notion of "stigma management," to describe strategies through which a "discredited person" minimizes the deleterious effects of this status.

The analysis reported here was part of a larger study of the life histories and coping strategies of low-income older women, reported in Barusch [2]. It was conducted to describe the impact of two potentially stigmatizing attributes, poverty and old age, on the self-concepts of women. J. I. Fiene noted that most studies of stigmatized women ". . . contain little information on the women's point of view" [3, p. 45]. Like her thoughtful examination of the construction of self by Appalachian women, this work emphasizes the perspectives of the women themselves. In addition to exploring the extent to which women apply

stigmatizing labels to themselves, the study examines strategies used to maintain a healthy sense of self.

MEASURING SELF-CONCEPT

Study of self-concept has been marked by attempts at definition, dating from William James' 1890 chapter on "The Consciousness of Self" in *Principles of Psychology*. Rosenberg argued that the James definition remains unsurpassed, and offered a succinct summary: "when we use the term 'self-concept', we shall mean *the totality of the individual's thoughts and feelings having reference to himself as an object*" [4, p. 71].

This definition includes evaluative and descriptive components. The evaluative part, self-esteem or self-worth, includes the beliefs and feelings an individual has about personal merit or value. The descriptive component, or self-concept, includes information about the traits and characteristics that uniquely define a person.

A wide range of standardized instruments have been developed to measure both self-esteem and self-concept [5-9]. But, as McCrae and Costa pointed out, these instruments "require the individual to describe him or herself along dimensions defined by the investigator" [10, p. S178]. These authors join McGuire [11] in suggesting that a less structured, open-ended format be used.

AGE AND THE SELF

Sharon Kaufman [12] and Sarah Matthews [13] examined the relationship between old age and self-concept. Kaufman interviewed 60 "urban, white, middle-class Californians over the age of 70" [12, p. 20] to describe how people interpret and derive meaning from their life experiences. Matthews used participant observation in a Senior Center and interviews with older widows to describe the strategies they used to maintain their "self-identities."

Both concluded that, as Matthews said, "oldness is not a pivotal self-identity" [13, p. 30]. Kaufman reported that: "The old Americans I studied do not perceive meaning in aging itself; rather, they perceive meaning in being themselves in old age" [12, p. 6]. These findings are consistent with the work of other researchers demonstrating that self-concept, personality traits, and self-esteem change remarkably little with advanced years [10, 14, 15].

Stigma Management

Goffman described several stigma management techniques [1]. These included: changing or concealing stigmatizing attributes (He called this "passing."); restricting social contacts (the "daily round") to intimates who can see beyond the stigma; and minimizing the importance of a stigma ("covering").

Matthews examined stigma management techniques used by older women to cope with the attribute "old" [13]. Some of the methods she identified paralleled those described by Goffman. For example, women in her sample reported that they: 1) *Conceal the attribute*, by refusing to tell anyone their age. She calls this "suppressing evidence" and; 2) *Avoid threatening situations*, for example they don't shop when young people are out. This strategy resembles Goffman's tactic of restricting social contacts in the "daily round."

Matthews identified five other strategies: 1) Bring in outside sources—remember others who don't think of you as old; 2) Reinterpret experiences—consider that what seems like oldness really isn't; 3) Attach new meaning to daily activities—stay busy and justify activities so they have meaning; 4) Maintain a belief in reciprocity—that you are giving, not just receiving, i.e., Social security is return on investment, not charity; and 5) Redefine oldness—define oldness in a way that excludes you.

Although some of Matthews' strategies may apply to only one attribute (oldness), others may serve more broadly. They might be used by individuals dealing with any potentially stigmatizing trait.

METHOD

Sample

This selective sample of sixty-two low-income women was recruited through contacts with agencies serving the elderly and through a snowball technique. Respondents were invited to participate in a study of the lives of older women with limited incomes. They were informed that no material from participants would be released to referring agencies or individuals, and asked to specify measures they would like used to disguise their identities.

Respondents were chosen to optimize diversity along several factors: ethnicity, age, income level, housing arrangement, and family composition. They lived in California, Utah, Alabama, Illinois, New York, Virginia, Washington, D.C., and the U.S. Territory of Guam. These sites were chosen to optimize cultural and ethnic diversity.

Women of color constituted 53 percent of the group. They were slightly over-represented here, making up 46 percent of the general population of older women in poverty [16].

Respondents ranged in age from 40 to 100 years, with a mean of 73. Six of the seven women under fifty-five years were living in homeless shelters, where we found it difficult to locate older women.

Most (68%) of those interviewed had annual household incomes below the federal poverty threshold. Another 19 percent had incomes between the poverty threshold and 125 percent of poverty. The remaining 13 percent had incomes up

to 185 percent of poverty. These "higher income" women had either medical or housing expenses that absorbed much of their income.

About one-third (34%) of the women owned their homes. Another third (31%) had rent subsidies. Nine women (15%) rented homes without subsidies. Three were in nursing homes. Nine homeless women were interviewed. They ranged in age from forty-nine to seventy-one years, with a mean of fifty-seven. One woman lived in her daughter's home.

The majority in this group (81%) were not married, with roughly equal proportions being divorced (34%) and widowed (37%). Between them, the women interviewed had a total of 200 living children, with a mean of three and a range from zero to thirteen. Fifteen percent of respondents had no children.

Method

Pilot interviews suggested that low-income older women, especially those for whom English was a second language, found it difficult to respond to structured instruments. Accordingly, we used a semi-structured conversational format to elicit open self-descriptions. Most interviews were done in the respondents' homes. They lasted from one to three hours. Four social scientists (including the author) conducted these interviews. All were white, and we ranged in age from twenty-five to fifty. All but three of the interviews were conducted in English.

The interview guide included questions related to the self: "How would you describe yourself?" or "How would your friends describe you?"

Some women (10% of those interviewed) found these questions difficult to answer. When asked to describe herself, one respondent answered "A person." When asked how her friends would describe her another replied:

You ask somebody maybe some of the people know me and some of the people they don't know me.

Interviewer: "Yeah. Somebody who knew you. What would somebody who knew you say about you. What kind of person you are? . . ."

Resp: "Well . . . They'd answer you back. I don't know that she's gonna tell you that she's very nice or what. I don't know that she's gonna talk to you."

In part because of these difficulties, information about self-concept was not limited to responses to these direct questions. Instead, any statement that described the respondent; reflected her assessment of her life; or illuminated her values and beliefs was used. A statement was defined as a phrase, usually consisting of one sentence and rarely including more than three, that expresses one idea. Statements were identified before themes were developed, then refined as coding schemes were established.

In addition to the above questions about self, our interview guide included the following questions on age and poverty:

- What did you think growing older would be like for you?
- Have your ideas about growing older turned out to be true?
- How do you feel about growing older now?
- What is the hardest thing about growing older? The best thing?
- Do you consider yourself poor? (probe: In what ways are you and are you not poor?)
- Why do you think so many older women have low incomes?

Although there was some variation, this was the exact wording used in most cases.

"Ethnograph" software was used to code and extract statements within each topic. These were reviewed, and themes identified. Then coding schemes were developed to reflect the occurrence of themes. Reliability checks were completed for these coding schemes. Two independent reviewers coded statements. To determine the clarity and distinctness of the subcategories, the reliability check was performed without prior discussion or training between reviewers. Reliability coefficients, reflecting the proportion of statements on which there was inter-rater agreement, are reported below. After coefficients were computed instances of disagreement were examined and resolved.

Coding schemes were established for the following topics: age, poverty or poor people, stigma management, and luck or fortune. Sixty-nine statements related to age were identified. The coding scheme for this topic had eight themes, with an inter-rater reliability coefficient of 87 percent. Respondents gave ninety-three statements relating to poverty or poor people. The coding scheme for this topic had ten themes and an inter-rater reliability of 78 percent. Forty-five statements related to stigma management were identified, relating to five themes. These had an inter-rater reliability of 83 percent. Although there were no questions relating to luck or fortune, respondents often mentioned this topic spontaneously in their self-descriptions. A coding scheme with eight themes was developed to organize the seventy-eight statements on the topic. It had an inter-rater reliability coefficient of 79 percent.

RESULTS

Age and the Self

We did not ask women directly whether they considered themselves old. Instead, categorization was based on transcript review. Women who described themselves as "old" were included in the "yes" group. The other group consisted of those who did not describe themselves as old.

Nearly half (44%) of the fifty-five women who discussed age described themselves as old. This group was comparable in age to those who did not describe themselves as old, with a range from 49 to 100, and mean of 77 years; compared

to the other group's range of 50 to 99 years, and mean of 72. Homeless women were more likely than others to consider themselves old. Despite their mean age of fifty-seven years, most (80%) of those interviewed in homeless shelters described themselves as old.

Themes that clarify the meaning of "old" for these women are presented in Table 1.

Incapacity and unpleasantness are attributes most commonly assigned to old age by women in this study. Roughly half (54%) of statements about age fit into these two categories. Often these statements emphasized functional limitations: "I can't do for myself like I used to." "I can't get to my washing machine." A few mentioned appearances: "(the hardest thing?) You get uglier."

The notion that age means time is running out was also commonly expressed, representing 12 percent of statements. For example: "I still have things left I want to do, and I haven't finished everything." Others chose not to use their remaining time worrying about things: "But at my age and my heart and that, I'm not going to put anymore into it (trying to cure husband's alcoholism)" and: "It's too late now . . . to worry about owning my own home."

Some women identified old age with good things like wisdom and freedom. Statements in this category made up 12 percent of comments about age. Relationships with men arose: "Old age has a great advantage. You don't have to tolerate a husband; most of the time he's gone." Other advantages included: "You're your own boss." and "I see the bright side of people."

While some comments (5%) emphasized the inevitability of age, more (9%) focused on the feasibility of fighting it. Regarding inevitability, one woman said:

Table 1. The Meaning of "Old"
(Total Statements = 69; $n = 55$)

Theme	Proportion of Coded Statements (%)
Old means incapacity	30
Old is unpleasant and ugly	24
Old means time is running out	12
Old brings good things/wisdom/freedom	12
You can fight oldness	9
Society treats old people different	8
Old is inevitable—God's will	5
Old is isolating	4
Total	104

^aTotal does not equal 100% due to rounding.

"It's just a process. You've got to do it." In contrast, another emphasized her plan to fight old age: "I'm never going to get old. Take it a day at a time. You're only as old as you feel."

Women also noted the ways in which society treats old people differently: "Government does not think that older people are people." "If they think I am a dumb old lady why bother with them?"

A few women described old age as isolating. Three mentioned the lack of relationships with men: "No more boyfriends. You know what, I'm too old already and I don't need it."

POVERTY AND THE SELF

About two-thirds (65%) of the fifty-two women responding reported that they did not consider themselves poor. Demographically, women who considered themselves poor were similar to those who did not. The two groups did not differ with respect to: mean income (\$6,480 per year, for those who considered themselves poor; compared to \$6,756); proportion with incomes below the federal poverty threshold (63% in both groups); percent married (16%, for those who did, compared to 17% for those who did not consider themselves poor); or ethnic composition (women of color were about half of each group).

The Meaning of Poverty

Table 2 presents themes used to clarify respondents definitions of "poor." Among these women, poverty can be understood with reference to three aspects: personal deficiencies, objective circumstances, and spiritual inadequacies.

Most of these women understood poverty through reference to objective circumstances. The majority (56%) of their statements describe objective circumstances of poverty. Respondents who did consider themselves poor emphasized either that they could not meet their needs or that they lacked savings: "I do not have the money or the material things . . . I don't have anything for a rainy day, you know." Some of those who considered themselves poor emphasized the intergenerational aspect of poverty. One Hispanic woman from New York said, "They [grandchildren] will always be poor. Their parents are poor. I am poor. How can they, even if they are intelligent, overcome this?" Others who did *not* consider themselves poor mentioned that they had everything they needed, "You know I feel like I've got all I need."

Respondents also referred to the personal deficiencies of the poor. About one-third of the statements (36%) were in this category. Typical statements include: "I am poor. (but) I am getting by. I mean, I'm not to where I need food stamps or anything like that." "They are lazy people . . . How come don't the ladies make something?" ". . . all the people who is too poor eh? . . . maybe on welfare."

Table 2. The Meaning of Poor
(Total Statements = 93; $n = 52$)

Theme	Proportion of Coded Statements (%)
Objective Circumstances	
Poor people can't have things they want or need (including savings)	20
Poor people have less than others (including opportunity)	12
Homeless people are poor	9
Children of poor people are poor (born poor, stay poor)	9
Poor people aren't working	6
Category Total	56
Personal Deficiencies	
Poor people are inferior (lazy, helpless)	24
Poor people are unhappy	9
Poor people are dependent on charity or welfare	3
Category Total	36
Spiritual Inadequacies	
Poor people don't have God on their side	8
TOTAL	100

Respondents occasionally referred to spirituality. One statement from a woman who considered herself poor included such reference: "No I know I'm poor. But I thank the Lord in a way. He ain't gonna let his children starve. Even if it ain't nothin but milk and bread, I'll eat that. Mmmm." Women who did not consider themselves poor used their spirituality to explain why. "No No I don't consider myself poor, but I consider myself . . . I am blessed." "No I'm rich in having the Lord in my life." "No No No. I consider myself rich with Jesus. I

consider myself rich because I'm in with Jesus." Others who did not consider themselves poor mentioned that they pray for the poor. Some prayed for the physical comfort of the poor, others for their spiritual enlightenment.

STIGMA MANAGEMENT STRATEGIES

Most women in this study resisted labeling themselves using the stigmatized terms "old" and "poor." They used various stigma management techniques to maintain positive self-concepts. To explore these techniques, all statements that described ways of coping with the psychological experiences of poverty were examined; five themes were identified. Results of this analysis are described below.

The most common approach, mentioned by 44 percent of those responding, was to count blessings. Women using this approach emphasized that they were managing alright: "I'm very comfortable, thank God." or "I've been making it pretty good." Others listed their assets: "I've got friends, I've got my health, I've got my life. And . . . I've got my grandkids and my kids."

Respondents also redefined poverty to exclude themselves. Nearly one-third (29%) gave a statement of this kind. Some emphasized that they had not been forced to resort to public assistance programs: "I mean, I'm not . . . to where I need food stamps or anything like that." Others focused on their personal capacities: "You're not really poor if you're imaginative and if you create a splendor for yourself." "As long as you can help yourself, I don't think you're poor, do you?"

Others emphasized managing their emotional responses to poverty. Some emphasized acceptance: "I just don't let it bother me." or "What I don't have don't worry me." Some responses were poignant in the effort they revealed: "I makes myself contented with the lot and I can make myself contented with nothin'." One woman combined acceptance with pride, saying,

You don't say, "well I'm poor and . . . I'm just a flop . . ." Well you don't have to do that. You can be all you can be. Stand up and be somebody and be proud and stuff. I'm not ashamed of my life. I tell my children all of the time that I am not ashamed . . . God didn't intend for me to be rich . . .

Some (8%) of the women examined compared themselves to others less fortunate. For example: "Well, sometime you look at your condition, look at the other fellow's condition, and some people's worse . . . Yeah. And so I'm thankful." This approach was used by one of the homeless women we interviewed. When she compared herself with others she found, "(I'm) definitely very poor (laughing) . . . in every way . . . no different than anybody out here on the street."

Some women (8% of those examined) emphasized that their poverty was temporary. This thought did not have to be based on realistic appraisal to provide comfort. One homeless woman remarked that the difference between herself and

someone who was really poor was that, "To me right now, it's probably some experience that I have to go through." She viewed neither her poverty nor her homelessness as permanent. Similarly, one respondent felt that once she was able to tap into her husband's social security benefits she would escape her marginal financial status. Another woman, whose assets had been spent on nursing home care for herself and her husband, believed that her financial guardian was holding out on her. "... it's awfully embarrassing for me, going through what I'm going through, because I've got it and I haven't got it."

DEFINING THE SELF

Overall, these women described themselves as fortunate and blessed, rather than old or poor. Homeless and institutionalized women; however, did not share this view.

Luck and Blessings

Over two-thirds (68%) of women who were neither homeless nor living in a nursing home spontaneously mentioned their fortune when talking about themselves. Among women who were homeless or institutionalized only one mentioned this topic.

Most women mentioned luck more than once; the thirty-seven women who mentioned luck did so an average of three times, with a range from one to six. Among those who mentioned their luck all but one considered themselves fortunate. The exception, a Hispanic woman living in New York, said "I wasn't a lucky woman, but I dealt with it."

Table 3 presents the number and percent of statements in each of the eight themes related to luck.

Personal attributes and possessions featured strongly among the reasons women in this group feel lucky, with each of these accounting for about one-fifth (21%) of the statements made. Reflecting on their personal attributes, most women emphasized the things they were able to do: "... lucky that I know how to write my name." "And I ain't so bad off, yet. I'm able to think." "I still thank God I'm able to move. Thank God he give me just any little strength so I can be able to get out and fiddle around." Another woman said, "I always thank the Lord that he gave me the knowledge and the wisdom to learn (English)."

Among their possessions, social security, food, housing, and insurance were emphasized: "I retired with social security. I'm lucky, eh?" "I thank the Lord because there are people who ... don't have food to eat three times a day and that's something to be thankful for." He (Lord) enabled me to get somewhere to stay when I didn't have nowhere to stay." "I have a (health insurance) card so we're very fortunate."

Table 3. Luck, Fortune, and Blessings
(*n* = 37)

	Number	Percent ^a
Personal attributes and abilities	16	21
Possessions	16	21
Friends, family, and support	12	15
General—just lucky	10	13
Hardship overcome (or spared)	9	11
Good health	7	9
Life/survival	6	8
Bad luck	2	3
Total	78	101 ^b

^aFigures represent the number and proportion of statements.

^bTotal does not equal 100% due to rounding.

Family and friends and the support they provide were often mentioned, representing 15 percent of statements made. Most of these statements related to friends: "I'm pretty fortunate. I have a place where I can go to everyday where I enjoy meeting people and have fun with, you know." "I am so fortunate, really I have such wonderful friends." Among family members, parents were mentioned, "I was blessed in that I did have a mother and a father . . ." "Children were mentioned only once, by a woman who was grateful that her daughter and son-in-law had entered treatment for heroin addiction. "I thank the Lord you know that they is doing better now. They're tryin to get em to say 'No'."

About one-in-ten statements (11%) related to hardship—difficulties that were overcome or that a woman was spared: "Lucky that I don't break my head on the what you call that . . . rock." "Myself, I take the minimum (health insurance). Thank God so far, nothing wrong."

Good health, long life, and survival were also mentioned, though less frequently. "So you just thanks the Lord to live each day by day and have good health." "I'm glad I'm a livin' and not sickly, not on nobody's hands."

DISCUSSION

Stigmatizing Labels

Most respondents resisted the stigmatizing labels, "old" and "poor." Those who did describe themselves as "old" differed from others in several ways. Bandura's notion of self-efficacy offers a possible explanatory framework [17]. Under his view, experiences of helplessness undermine self-efficacy or the sense

of personal effectiveness. Conversely, success experiences contribute to a belief in self-efficacy. Effective stigma management may require belief in one's self-efficacy.

Those who considered themselves old were more likely to be homeless. Life on the street exposes a woman to dangerous and uncontrollable conditions, reinforcing a sense of helplessness. And life in a homeless shelter may reinforce a woman's view that she is "old." In the shelter, a woman in her sixties is generally the oldest resident, surrounded by younger women and their children. One homeless respondent noted that services provided in the shelter by churches and agencies tended to focus on younger women. She commented: "The programs and the support . . . and the enthusiasm and the willingness to be there . . . aren't there when you're older and don't have children. Especially if you're in a place like (this shelter)." These constant reminders and the sense of helplessness associated with homelessness may undermine a woman's ability to resist the "old" stigma. The interaction between stigma management and self-efficacy merits further consideration.

"Old" vs. "Poor"

Matthews suggested that "Old people share with other members of society the stereotypical view of old people" [13, p. 67] and convincingly argued that old is "an attribute that is deeply discrediting" [13, p. 57]. Yet a few of the women in this group presented a vision of old age that is not discrediting, but ennobling.

Findings of this study also suggest that the label "old" is less stigmatizing than "poor." This is seen in greater willingness to apply the term "old" to themselves. Nearly half, (44%) of those interviewed described themselves as old, while only one-third (35%) considered themselves poor. Further support of this notion is seen in the meaning assigned to the terms. While the statements related to old age were often negative, about one-in-ten mentioned the benefits or gifts of age. In contrast, statements relating to poverty and poor people were neutral at best.

Attribution theory may shed some light on the difference between the stigma associated with age and that linked to poverty. Weiner and colleagues examined perceptions about causality to determine their impact on affective response to stigmatizing conditions [18]. They reported that the perception of controllability is linked to negative responses, such as blame and anger. Stigmatizing conditions that were seen as unavoidable (Alzheimer's disease, blindness) aroused less negative reactions than those seen as avoidable (AIDS, drug abuse). Applied to this study, their results would suggest that old age (widely seen as inevitable) would arouse a less negative reaction than poverty (often seen as a sign of personal failure). The stereotypes associated with old age may be generally less negative than those attached to poverty.

Stigma Management

Results of this study support, expand, and extend the results of Matthews' study. Women in this study used two of the strategies identified by Matthews: comparing themselves to others, and redefining the attribute (in this case, poverty). Although not identified in this sample, low-income older women may also use strategies identified by Goffman. They may cope with the poverty stigma by suppressing evidence or "passing" (maintaining appearances) and avoiding threatening situations (such as welfare departments) in their "daily round." These four strategies may therefore have broad relevance for people coping with a wide range of stigmatized attributes.

Positive Approaches to Self-Definition

Except for the homeless and institutionalized, most of the women interviewed for this book considered themselves fortunate. This attitude may both result from, and contribute to, survival. Speaking of age, one respondent said: "Who would want to hate it . . . to me life is to be enjoyed." Hate, anger, and bitterness can be all-consuming emotions. They take a physical toll and diminish a woman's coping resources. One might dispute the accuracy of a woman's view of herself as fortunate, but few would argue that she would be better off without it.

The ability to see oneself as fortunate may be a significant component of successful aging. Most studies in this area have examined people of middle-class backgrounds. Yet among low-income women we find stunning examples of personal success in difficult circumstances.

ACKNOWLEDGMENTS

The author is grateful for financial support provided by the University of Utah Research Committee and the advice and encouragement provided by Naomi Gottlieb.

REFERENCES

1. E. Goffman, *Stigma: Notes on the Management of Spoiled Identity*, Prentice-Hall, Inc., Englewood Cliffs, New Jersey, 1963.
2. A. S. Barusch, *Older Women in Poverty: Private Lives and Public Policies*, Springer Publishing, New York, 1994.
3. J. I. Fiene, The Construction of Self by Rural Low-Status Appalachian Women, *Affilia*, 6:2, pp. 45-60, 1991.
4. M. Rosenberg, *Conceiving the Self*, Basic Books, Inc., New York, 1979.
5. J. D. Campbell, Self-Esteem and Clarity of Self-Concept, *Journal of Personality and Social Psychology*, 59, pp. 538-549, 1990.

6. R. Caracosta and W. B. Michael, The Construct and Concurrent Validity of a Measure of Academic Self-Concept and One of Locus of Control for a Sample University Students, *Educational and Psychological Measurement*, 46, pp. 735-744, 1986.
7. B. Crowder and W. B. Michael, The Development and Validation of a Short Form of a Multidimensional Self-Concept Measure for High Technology Employees, *Educational and Psychological Measurement*, 51, pp. 447-454, 1991.
8. S. J. Paik, Self-Concept of Pregnant Teenagers, *Journal of Health and Social Policy*, 3, pp. 93-111, 1992.
9. S. Zorich and W. M. Reynolds, Convergent and Discriminant Validation of a Measure of Social Self-Concept, *Journal of Personality Assessment*, 52, pp. 441-453, 1988.
10. R. R. McCrae and P. T. Costa, Age Personality and the Spontaneous Self-Concept, *Journal of Gerontology: SOCIAL SCIENCES*, 43, pp. S177-185, 1988.
11. W. J. McGuire, Search for the Self: Going beyond Self Esteem and the Reactive Self, in *Personality and the Prediction of Behavior*, R. A. Zucker, J. Aronoff, and A. I. Rabin (eds.), Academic Press, New York, 1984.
12. S. R. Kaufman, *The Ageless Self: Sources of Meaning in Late Life*, University of Wisconsin Press, 1986.
13. S. H. Matthews, *The Social World of Old Women: Management of Self-Identity*, Sage, Newbury Park, 1979.
14. M. M. Baltes and U. Schmid, Psychological Gerontology, *German Journal of Psychology*, 11, pp. 87-123, 1987.
15. V. L. Bengtson, M. N. Reedy, and C. Gordon, Aging and Self-Conceptions: Personality Processes and Social Contexts, in *Handbook of the Psychology of Aging* (2nd Edition), J. E. Birren and K. W. Shaie (eds.), Van Nostrand Reinhold, New York, 1985.
16. U.S. Bureau of Census, *Poverty in the United States: 1991*, Current Population Reports, Series P-60, No. 181, Government Printing Office, Washington, D.C., 1992.
17. A. Bandura, Self-Efficacy: Toward a Unifying Theory of Behavioral Change, *Psychological Review*, 84, pp. 191-215, 1977.
18. B. Weiner, R. P. Perry, and J. Magnusson, An Attributional Analysis of Reactions to Stigmas, *Journal of Personality and Social Psychology*, 55, pp. 738-748, 1988.

Direct reprint requests to:

Amanda Smith Barusch, MSW, Ph.D.
 Graduate School of Social Work
 University of Utah
 Salt Lake City, UT 84010